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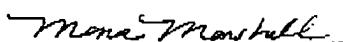
To: Commissioner for Patents **From:** Serge J. Hodgson
Fax: 571-273-8300 **Total no. of pages:** 3 (including this page)
Date: March 25, 2009

Re: First Named Inventor: Gary M. Moore
Assignee: Moore Epitaxial Inc.
Title: METHOD OF CONTROLLING GAS FLOW TO A SEMICONDUCTOR PROCESSING REACTOR
Application No.: 09/765,919 **Filing Date:** January 18, 2001
Patent No.: 6,773,749 **Issue Date:** August 10, 2004
Attorney Docket No.: MTEC101001

Enclosed herewith is a Request for Withdrawal as Attorney or Agent and Change of Correspondence Address (2 pages).

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office (fax no. 571-273-8300) on the date shown below.


Mona Marshall

March 25 2009
Date of Signature

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/765,919
	Filing Date	January 18, 2001
	Patent Number	6,773,749
	Issue Date	August 10, 2004
	First Named Inventor	Gary M. Moore
	Attorney Docket Number	MTEC101001

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application; and

all the practitioners of record;
 the practitioners (with registration numbers) of record listed on the attached paper(s); or
 the practitioners of record associated with Customer Number 23513

NOTE: The immediately preceding box should only be marked when the practitioners were appointed using the listed Customer Number.

The reason(s) for this request are those described in 37 CFR:

<input type="checkbox"/> 10.40(b)(1)	<input type="checkbox"/> 10.40(b)(2)	<input type="checkbox"/> 10.40(b)(3)	<input type="checkbox"/> 10.40(b)(4)
<input type="checkbox"/> 10.40(c)(1)(i)	<input type="checkbox"/> 10.40(c)(1)(ii)	<input type="checkbox"/> 10.40(c)(1)(iii)	<input type="checkbox"/> 10.40(c)(1)(iv)
<input type="checkbox"/> 10.40(c)(1)(v)	<input checked="" type="checkbox"/> 10.40(c)(1)(vi)	<input type="checkbox"/> 10.40(c)(2)	<input type="checkbox"/> 10.40(c)(3)
<input type="checkbox"/> 10.40(c)(4)	<input type="checkbox"/> 10.40(c)(5)	<input type="checkbox"/> 10.40(c)(6) Please explain below:	

Certifications

Check each box below that is factually correct. **WARNING: If a box is left unchecked, the request will likely not be approved.**

- I/We have given reasonable notice to the client, prior to the expiration of the response period, that the practitioner(s) intend to withdraw from employment
- I/We have advised the client or a duly authorized representative of the client that all papers and property to which the client is entitled will be returned upon receipt of written directions for return. No funds are involved.
- I/We have notified the client of any responses that may be due and the time frame within which the client must respond.

Please provide an explanation, if necessary:

**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF CORRESPONDENCE ADDRESS**

Complete the following section only when the correspondence address will change. *Changes of address will only be accepted to an inventor or an assignee that has properly made itself of record pursuant to 37 CFR 3.71.*

Change the correspondence address and direct all future correspondence to:

A. The address of the inventor or assignee associated with Customer Number: _____

OR

B. Inventor or
Assignee name Moore Epitaxial, Inc.

Address 1905 N. MacArthur Drive

City Tracy	State CA	Zip 95376	Country US
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Telephone	Email
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I am authorized to sign behalf of myself and all withdrawing practitioners.

Signature *Forrest Gunnison* Re. Ab. 32,899

Name Serge J. Hodgson Registration No. 40,017

Address Gunnison, McKay & Hodgson, L.L.P. 1900 Garden Road, Suite 220

City Monterey	State CA	Zip 93940	Country US
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Date March 25, 2009	Telephone No. (831) 655-0880
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NOTE: Withdrawal is effective when approved rather than when received.